



Division of Laboratory Services  
630 Hart Lane  
Nashville, TN 37216  
615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

**Disease/Agent Suspected or Test Requested:**

**Mumps Virus PCR**

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| <b>Provider Requirements</b>                              | <ul style="list-style-type: none"><li>• Isolate Submission <b>REQUIRED</b></li><li>• <b>PRIOR CONSULTATION REQUIRED</b><ul style="list-style-type: none"><li>• Requested through consultation with epidemiology only.</li><li>• Contact <a href="#">CEDEP</a> prior to submission.</li><li>• Specimens received without documented consultation will not be tested.</li></ul></li></ul> |
| <b>Acceptable Specimen Sources/Type(s) for Submission</b> | Buccal swab   |
| <b>TDH Requisition Form Number</b>                        | <b>PH-4182</b>  |
| <b>Media Requirements</b>                                 | Viral Transport Media   |
| <b>Special Instructions</b>                               |   |
| <b>Shipping Instructions</b>                              | <ul style="list-style-type: none"><li>• Ship <b>COLD</b> on cold packs</li><li>• Ship on dry ice <i>if already frozen</i></li></ul>   |
| <b>Laboratory Section Performing Testing</b>              | Virology  |
| <b>Lab Location(s) Performing Test</b>                    | Nashville   |

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).